

## ENTERTAINMENT FACILITY LICENSE APPLICATION

FAN	I A - 10 BE COMPLETED BY APPLICANT	
1.	Name of Applicant:	
2.	License Year:	3. Organization Type: Individual; Partnership; Corporation; L.L.C.
4.	Type of License: New; Renewal; Sup	pplement to Liquor License;
5.	Address of Applicant:	
	STREET ADDRESS  Trade Name:	CITY, STATE & ZIP CODE  7. Business Phone:
		7. Dusiness Filone.
9.	Age of patrons to be allowed to enter the facility (c	heck only one): All Ages; 16 and Over; 18 and Over
10	. List the name, title, and place of residence of each interested in the control of the business:  TITLE (if any)  FULL NAME	ch person, officer, director, partner, limited partner, and any other person who is directly  HOME ADDRESS  CITY, STATE & ZIP CODE
	TITLE (II ally) FULL WAWIE	HOWE ADDRESS CITE & ZIP CODE
	** FACH DEDCONLISTED ADOVE M	UST COMPLETE AN "AUXILIARY QUESTIONNAIRE" (FORM GB-AUX) **
11		
	eany other person, partnership, corporation or organization interested directly in the control of this business?	
12		ilar license or permit? (IF YES, LIST NAME AND LOCATION):
13	CORPORATE APPLICANTS ONLY. List state and date of incorporation:	
	Name and Address of Registered Agent:	
PΔR1	T C - TO BE COMPLETED AT THE CITY CLERK'S	
RI ans	EAD CAREFULLY BEFORE SIGNING. Uswered to the best of the knowledge of the signers. Ar	Inder penalty provided by law, the signers state that each of the above questions has been truthfully ny inaccurate answer may be grounds for denial of the application. Signers agree to operate this e Green Bay Municipal Code. The signers agree that the license, if granted, will not be assigned to
Sub	bscribed and sworn to before me	(Individual / Officer / Member / Manager / Partner)
this	s day of,,	
(Cle	erk / Notary Public)	(Individual / Officer / Member / Manager / Partner)
Му	commission expires:	(Individual / Officer / Member / Manager / Partner)
PART	T D – FOR CITY USE ONLY	
	ate Received and Filed:	Council Action & Date:
	ate License Issued:	
FORI	M GB-6.03 (06/2001)	